away from the United States; but those young men have done an outstanding job. Congratulations, and we wish them the best as they go forward to the next level. I believe we may just be the winners.

SPECIAL ORDERS

The SPEAKER pro tempore (Mrs. BIGGERT). Under the Speaker's announced policy of January 3, 2001, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from North Carolina (Mr. JONES) is recognized for 5 minutes.

(Mr. JONES of North Carolina addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Florida (Mrs. Thurman) is recognized for 5 minutes.

(Mrs. THURMAN addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. FILNER) is recognized for 5 minutes.

(Mr. FILNER addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

PRESCRIPTION DRUG PRICES

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Minnesota (Mr. Gutknecht) is recognized for 5 minutes.

Mr. GUTKNECHT. Madam Speaker, I rise tonight to talk about an issue that the House is going to be addressing in the next several weeks. We are going to start having hearings, I understand, later this week or early next week on the issue of prescription drugs. What I want to talk about tonight is the difference between what Americans pay for prescription drugs and what consumers in the rest of the world pay.

I have on my Website a chart which is absolutely eye-opening when one looks at the differences for the 15 most commonly prescribed drugs, what we pay in the United States versus what they pay in Europe, and let me give one example. My father is 83 years old. He takes a drug called Coumadin, which is a blood thinner, and one of the most commonly prescribed drugs in the United States.

In the United States, the average price for a 30-day supply of Coumadin is \$64.80. That exact same drug made in the same plant under the same FDA approval sells in Europe for \$15.80. It is four times more expensive in the United States. That pattern repeats

itself with drug after drug after drug. A few years ago when we first started doing this research, the price for a 30-day supply of Coumadin in the United States was not \$68, it was \$38. It has gone up by approximately \$30 in a little over 2.5 years. That is being repeated.

Last year the amount that Americans spent on prescription drugs went up almost 19 percent. That is at a time when the average Social Security recipient received an increase of only 3.5 percent.

It is outrageous. And I am not here to blame the pharmaceutical industry. I am not here to say, shame on the pharmaceutical industry. They have really done some marvelous things, and we all enjoy better health today thanks to the pharmaceutical industry.

I think we need to pay for the research, but what we are finding out more and more is not only do we pay for the research, we pay for the advertising, the marketing. We are paying for a tremendous amount of overhead, and they still are the most profitable industry listed on the New York Stock Exchange. Almost any way it is measured, they are the most profitable.

The American consumer is subsidizing the pharmaceutical industry essentially in three ways: First of all, we subsidize them in the amount that we spend on basic research through the NIH, the Science Foundation, other groups that are doing research. We are subsidizing basic research in the United States by over \$20 billion a year. That is through the taxpayers.

Then we subsidize them in the Tax Code. When they talk about how much they spend on research, that is not exactly the whole story, because when they spend that money on research, at least they can write it off on the bottom line. Most of these companies are extremely profitable, in the 50 percent tax bracket. Half of their research costs, at least, are written off. In some cases they qualify for investment tax credits, and so they get dollar for dollar. In other words, they write off all of the expense on the Tax Code.

The third way we subsidize the pharmaceutical industry is in the prices we pay. Conservatively, we could save American consumers 35 percent if we simply do what we do with virtually every other product, and that is open up the American market so Americans would have access to drugs at world market prices. My vision is that the average consumer should be able to go to their local pharmacy, deal with their local pharmacist, and have this option. If their drug has to come from the American inventory, then they would have to pay the American price, whatever that is, and we will let the pharmaceutical industry decide that.

But if the pharmaceutical industry is willing to sell drugs like Cipro, for example, for half the price in Germany, and that is made by a German company, Bayer. Bayer makes it in Germany, and they will sell it in Germany for half the price that they sell it for

here in the United States. If that is the case, at least allow that consumer to say to their pharmacist, is there a way we can place this order over the Internet and save some money? Then the pharmacist could say, I can order this out of a pharmaceutical supply operation out of Paris, France; Geneva, Switzerland, and you can save 50 percent, whatever the number is.

The reason this becomes important is our own Congressional Budget Office is estimating that American seniors over the next 10 years will spend \$1.8 trillion.

Madam Speaker, if we are correct, by allowing open markets, free markets, we believe in NAFTA, GATT, free trade, except where American consumers could save the most, if we would just simply open our markets and allow that kind of competition, we could save American consumers \$630 billion over the next 10 years.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. George Miller) is recognized for 5 minutes.

(Mr. GEORGE MILLER of California addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

H.R. 3250, CODE TALKERS RECOGNITION ACT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from South Dakota (Mr. Thune) is recognized for 5 minutes.

Mr. THUNE. Madam Speaker, my State of South Dakota has had a long history that extends back before the founding of our country by western explorers, back to a time when buffalo roamed the land and Native American culture was the way of life. Regrettably, the important and revered culture of these great people was nearly erased from American history.

However, at a time when Sioux Indians were discouraged from practicing their native culture, a few brave men used their language to help change the course of our Nation's history. These men are known as the Sioux code talkers. They served our country with distinction in both the Pacific and European theaters of World War II. These code talkers used their Lakota, Dakota and Nakota dialects to send coded communications that the enemy was unable to crack.

They were often sent out on their own to communicate with head-quarters regarding enemy location and strength without protection from the enemy. Sometimes they spent over 24 hours in headphones without sleep or food, in terrible conditions.

Today, military commanders credit the code talkers with saving the lives of countless American soldiers and being instrumental to the success of the United States military during World War II.